

**U.S. DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS
ATTORNEY APPEARANCE FORM**

NOTE: In order to appear before this Court an attorney must either be a member in good standing of this Court's general bar or be granted leave to appear *pro hac vice* as provided for by Local Rules 83.12 through 83.14.

In the Matter of

Case Number: 08-cv-2605

Physiotherapy Corporation v.
Richard W. Rausch, et al.

AN APPEARANCE IS HEREBY FILED BY THE UNDERSIGNED AS ATTORNEY FOR:

SOVEREIGN REHABILITATION OF ILLINOIS, LLC

NAME (Type or print)		Michael Weininger
SIGNATURE (Use electronic signature if the appearance form is filed electronically) s/ <i>Michael Weininger</i>		
FIRM		LUPEL WEININGER LLP
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CITY/STATE/ZIP		Chicago, IL 60602
ID NUMBER (SEE ITEM 3 IN INSTRUCTIONS) 2966271	TELEPHONE NUMBER (312) 260-7700	
ARE YOU ACTING AS LEAD COUNSEL IN THIS CASE?		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
ARE YOU ACTING AS LOCAL COUNSEL IN THIS CASE?		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
ARE YOU A MEMBER OF THIS COURT'S TRIAL BAR?		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
IF THIS CASE REACHES TRIAL, WILL YOU ACT AS THE TRIAL ATTORNEY? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		
IF THIS IS A CRIMINAL CASE, CHECK THE BOX BELOW THAT DESCRIBES YOUR STATUS. RETAINED COUNSEL <input type="checkbox"/> APPOINTED COUNSEL <input type="checkbox"/>		